



1. CORRESPONDENCE ADDRESS

ANTONELLI TERRY STOUT AND KRAUS
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SUITE 1800
ARLINGTON VA 22209

| SERIES CODE/SERIAL NO. | FILING DATE | TOTAL CLAIMS | EXAMINER AND GROUP ART UNIT | DATE MAILED |
|------------------------|-------------------------|--------------|-----------------------------|-------------|
| 08/306,612 | 09/15/94 | 006 | FEARS, JT 2511 | 01/24/95 |
| First Named Applicant | SHIMOHIGASHI, KATSUHIRO | | | |

TITLE OF INVENTION SEMICONDUCTOR MEMORY

| ATTY'S DOCKET NO. | CLASS-SUBCLASS | BATCH NO. | APPLN. TYPE | SMALL ENTITY | FEE DUE | DATE DUE |
|-------------------|----------------|-------------|-------------|--------------|-----------|----------|
| 2 | 501.18758C13 | 365-189.010 | I22 UTILITY | NO | \$1210.00 | 04/24/95 |

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ANTONELLI, TERRY,
STOUT & KRAUS

HITACHI, LTD.
Tokyo, JAPAN

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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signatures) Gregory A. Moore 4/24/95

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MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee applications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

| | | | |
|--|--|--|--|
| 1. CORRESPONDENCE ADDRESS | | 2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change) | |
| ANTONELLI TERRY STOUT AND KRAUS 1300 NORTH SEVENTEENTH STREET SUITE 1800 ARLINGTON VA 22209 | | INVENTOR'S NAME | |
| | | Street Address | |
| | | City, State and ZIP Code | |
| | | CO-INVENTOR'S NAME | |
| | | Street Address | |
| | | City, State and ZIP Code | |
| | | <input type="checkbox"/> Check if additional changes are on reverse side | |

| | | | | |
|---|-------------|--------------|-----------------------------|---------------|
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| First Named Applicant SHIMOHIGASHI, KATSUHIRO | | | | |

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| ATTY'S DOCKET NO. | CLASS-SUBCLASS | BATCH NO. | APPL. TYPE | SMALL ENTITY | FEE DUE | DATE DUE |
| 2 | 501.18758C13 | 365-189.010 | 122 UTILITY | NO | \$1210.00 | 04/24/95 |

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| 3. Correspondence address change (Complete only if there is a change) | | 4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. | |
| | | 1. ANTONELLI, TERRY, STOUT & KRAUS 2. _____ 3. _____ | |

050 MH 04/28/95 08306612

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| 6. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (Form or type) | | 7. The following fees are enclosed: | |
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| (Authorized Signature) Gregory E. Montone | (Date) 4/24/95 |

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